

## Fetal Death Screening Tool

Purpose: To facilitate the review process of fetal deaths by the local FICMR coordinator.

## Process:

- 1. Local FICMR coordinator will receive notice of fetal death from local clerk/recorder or through review of quarterly Vital Statistics Mortality Report.
- 2. Fetal death certificates will be obtained from state FICMR coordinator. Death certificates from the county clerk may not contain the complete medical information.
- 3. Local FICMR coordinator will screen <u>all</u> fetal deaths that occur to county residents using the Fetal Death Screening Tool (attached). Then, based on screening results, local FICMR coordinator would determine whether findings indicated need for complete FICMR review. This determination would be done on a case-by-case basis and at the professional discretion of the local FICMR coordinator.
- 4. For complete fetal death reviews, counties where FICMR team members do not have obstetric or neonatal experience may want to partner with counties where obstetric and neonatal professionals are FICMR team members. The screening tool will help identify major risk factors (both modifiable and non-modifiable) for preterm birth.
- 5. It is recommended that a complete FICMR review (with the entire team) take place in deaths with any one of the following risk factors:
  - a. maternal smoking during pregnancy
  - b. maternal use of alcohol or illicit drugs during pregnancy
  - c. history of preterm delivery
  - d. late or no prenatal care
  - e. maternal pre-existing chronic conditions (hypertension, diabetes or obesity)
  - f. if after using screening tool the local FICMR coordinator feels a full review is warranted due to lack of information or presence of risk factors

In these cases a complete FICMR review should help to determine whether interventions/services are present in the community to help reduce these risk factors. This can lead to discussion on prevention efforts at the local level, which is a major goal of FICMR,

## **Definition of Terms**

Fetal Death--stillborn birth of fetus weighing at least 350 grams or if weight is not known has reached 20 weeks gestation.

Illicit Drug use-- Maternal use of illicit drugs or any prescription-type psychotherapeutic (such as stimulants, sedatives, tranquilizers, and pain relievers) used non-medically during pregnancy.

Fetal death screening—Local FICMR coordinator will use the Fetal Death Screening Tool to screen all fetal deaths. Following the completion of the screening, the local FICMR coordinator will determine the need to take the review on to the local team for a complete FICMR review.

Complete FICMR review—the review of a death by the local multidisciplinary FICMR team using the complete FICMR review tool

Late entry to prenatal care—maternal entry to prenatal care occurred after 12 completed weeks of pregnancy.



FETAL DEATH SCREENING TOOL					
Date of Death: Death Certificate Number:					
MM DD YYYY  County of Maternal Residence: County of Death:					
Environmental Factors-Maternal			Please circle best answer		
1.	Mother smoked/used tobacco products du	ring pregnancy	Yes	No	Unknown
2.	Non-smoking mother exposed to second hand	cigarette smoke during pregnancy	Yes	No	Unknown
3.	Maternal use of illicit drugs or any prescript medication used non-medically during preg	• • • •	Yes	No	Unknown
4.	Maternal use of alcohol during pregnancy		Yes	No	Unknown
5.	Homeless during pregnancy		Yes	No	Unknown
6.	Mother experienced domestic violence during p	pregnancy	Yes	No	Unknown
Prenatal or Maternal Medical History					
1.	Maternal history of previous preterm delive	ry	Yes	No	Unknown
2.	Maternal history of difficulty conceiving		Yes	No	Unknown
3.	Maternal history of previous fetal loss		Yes	No	Unknown
4.	Was labor induced in this pregnancy?		Yes	No	Unknown
5.	Was this a C-section delivery?		Yes	No	Unknown
6.	Late entry or no prenatal care?		Yes	No	Unknown
7.	Maternal hypertension before pregnancy (c	hronic hypertension)	Yes	No	Unknown
8.	Pregnancy induced maternal hypertension		Yes	No	Unknown
9.	Maternal diabetes before pregnancy		Yes	No	Unknown
10.	Developed gestational diabetes with this pr	egnancy	Yes	No	Unknown
11.	Maternal obesity		Yes	No	Unknown
12.	Maternal age <19 or >35		Yes	No	Unknown
Pregnancy Outcome					
1.	Multiple birth		Yes	No	Unknown
2.	Congenital Anomaly not compatible with life		Yes	No	Unknown
3.	Placental or cord problems		Yes	No	Unknown
4.	Fetal gestational age 20-24 weeks		Yes	No	
5.	Fetal gestational age 25-31		Yes	No	
6.	Fetal gestational age 32-37		Yes	No	
7.	Fetal gestational age >37 weeks		Yes	No	

Complete FICMR team review indicated? Yes No Note: A complete review is recommended if the answer to any of the bolded items is "Yes."